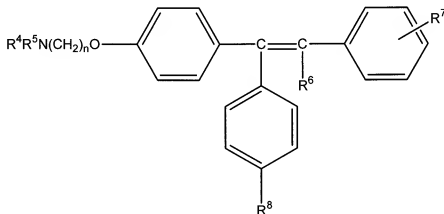


**In the Claims**

1. (Cancelled)
6. (Previously Presented) A method of claim 23, wherein the compound administered is 1-p- $\beta$ -dimethylaminoethoxyphenyl-trans-1,2-diphenylbut-1-ene, or a pharmaceutically acceptable salt thereof.
7. (Previously Presented) A method of claim 23, wherein the patient has diabetes.
8. (Previously Presented) A method of claim 23, wherein the patient has had a surgical procedure.
9. (Previously Presented) A method of claim 23, wherein the patient has hypertension.
10. (Previously Presented) A method of claim 23, wherein the patient has coronary artery disease.
11. (Previously Presented) A method of claim 23, which further comprises administering a pharmaceutically-effective compound selected from the group consisting of: an anti-diabetes agent; an anti-hypertension agent; an anti-coronary artery disease agent; and an anti-restenosis agent.

23. (Currently Amended) A method of claim 25 [[1]], wherein the CLC3 blocker is a compound of Formula I



wherein

either  $\text{R}^4$  is H or a lower alkyl radical and  $\text{R}^5$  is a lower alkyl radical, or  $\text{R}^4$  and  $\text{R}^5$  are joined together with the adjacent nitrogen atom to form a heterocyclic radical;

$\text{R}^6$  is H or a lower alkyl radical;

$\text{R}^7$  is H, halo, OH, a lower alkyl radical, or is a buta-1,3-dienyl radical which together with the adjacent benzene ring forms a naphthyl radical;

$\text{R}^8$  is H or OH; and

$n$  is 2;

or a pharmaceutically acceptable salt thereof.

25. (Previously Presented) A method to normalize the contractile response of vasculature in response to a vasoconstrictor agonist in a patient in need of such normalization, the vasculature comprising a vascular smooth muscle cell layer and a compromised endothelial cell layer, wherein the method comprises administering a pharmaceutically effective amount of a CLC3 blocker, or a pharmaceutically acceptable salt thereof, and wherein the vasoconstrictor agonist is norepinephrine.